GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:654
ANSWERED ON:26.02.2016
Child Mortality
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the incidence of infant, child and maternal mortality rate in the country is high as compared to other developing countries of the world including BRICS and SAARC countries;

(b) if so, the details thereof along with the schemes/programmes/funds launched/ released to check high mortality rate during the last three years and the current year, scheme and State/UT-wise;

(c) whether India has achieved the target set under Millennium Development Goals (MDGs);

(d) if so, the details thereof and if not, the reasons for slow progress in this regards; and

(e) whether infant/maternal mortality rate has decreased in the States covered under National Family Health Survey (NFHS), if so, the details thereof?

Answer

ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(SHRI JAGAT PRAKASH NADDA)
(a): The incidence of infant, child and maternal mortality rates/ratio in country is higher as compared to BRICS Countries whereas among SAARC Countries, Afghanistan and Pakistan have higher infant, child and maternal death rates as compared to India.
(b): The detailed comparison of infant, child and maternal mortality rates/ratio BRICS and SAARC Countries are placed in Annexure I.
The Government of India is implementing the following interventions under the National Health Mission (NHM) all across the country to reduce child, infant and maternal mortality:
i. Promotion of Institutional deliveries through cash incentive under Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakaram (JSSK) which entitles all pregnant women delivering in public health institutions to absolutely free and no expense ante-natal check-ups, delivery including Caesarean section, post-natal care and treatment of sick infants till one year of age.
ii. Strengthening of delivery points for providing comprehensive and quality Reproductive, maternal, newborn, Child and Adolescent Health (RMNCH+A) Services, ensuring essential newborn care at all delivery points, establishment of Special Newborn Care Units (SNCU), Newborn Stabilization Units (NBSU) and Kangaroo Mother Care (KMC) units for care of sick and small babies.

iii. Early initiation and exclusive breastfeeding for first six months and appropriate Infant and Young Child Feeding (IYCF) practices are promoted in convergence with Ministry of Women and Child Development. Village Health and Nutrition Days (VHNDs) are observed for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education.

iv. Universal Immunization Programme (UIP) is being supported to provide vaccination to children against many life threatening diseases such as Tuberculosis, Diphtheria, Pertussis, Polio, Tetanus, Hepatitis B and Measles. Pentavalent vaccine has been introduced all across the country and "Mission Indradhanush" has been launched to fully immunize more than 89 lakh children who are either unvaccinated or partially vaccinated; those that have not been covered during the rounds of routine immunization for various reasons.

v. Name based tracking of mothers and children till two years of age (Mother and Child Tracking System) is done to ensure complete antenatal, intranatal, postnatal care and complete immunization as per schedule.

vi. Rashtriya Bal Swasthya Karyakram (RBSK) for health screening, early detection of birth defects, diseases, deficiencies, development delays including disability and early intervention services has been operationalized to provide comprehensive care to all the children in the age group of 0-18 years in the community.

vii. Some other important interventions are Iron and folic acid (IFA) supplementation for the prevention of anaemia among the vulnerable age groups, annual deworming on National Deworming Day (NDD), home visitation by ASHAs to promote exclusive breast feeding and early detection and referral of sick newborns and promote use of ORS and Zinc for management of diarrhoea in children.

The funds allocated and released during the last three years, State and UT wise for the Reproductive and Child Health programme under the national Health Mission are detailed at Annexure-II.

(c) & (d): India has made steady progress in reduction of Under-five mortality Rate (U5MR) from 126/1000 live births in 1990 to 49/1000 live births in 2013 as per the Sample Registration System Report (SRS) issued by the Registrar General of India (RGI). India may come close to achieving MDG-4 target of Under 5 mortality rate 42/1000 live births, provided the current trend of annual decline of 6.6 percent continues.

MDG 5 target is to reduce Maternal Mortality Ratio (MMR) by three quarters between 1990 and 2015. This translates to reducing the MMR from 560 in 1990 to 140 in 2015. As per the official report of the Registrar General of India, Sample Registration System (RGI-SRS), Maternal Mortality Ratio (MMR) of India has shown a declined to 167 per 100,000 live births in the period 2011-13. India's MMR is likely to reach 141 if current rate of annual decline continues.

(e): Reports are available for15 states/UTs where National Family Health Survey − 4 (NFHS-4) was carried out and IMR has declined in all these states. The comparison of IMR from NFHS- 3 and NFHS-4 is placed at Annexure-III.
National Family Health Survey (NFHS) does not give data on MMR.